



SIGNING ON FORM

2019-2020 SEASON

Club membership is required for all players. All payments cover the cost of insurance, utilities, equipment, pitches, league fees, club maintenance and future investment.

To register your child, please complete **ALL** of the sections below.

Full Name _____ Date of Birth ____/____/____

Address _____

_____ Postcode _____

Contact Numbers _____

E-Mail Address _____

(Please note that by providing your email address you give consent to be contacted by Fairford Youth Football Club in matters relating to my child's football and the Club as a whole). The Club complies with GDPR and your details will not be shared with any third party.

School _____

Emergency contact and numbers NAME 1 _____ TELEPHONE _____

NAME 2 _____ TELEPHONE _____

Does the player being registered have any of the following conditions (tick any that apply)

Asthma Epilepsy Diabetes Other

Please give details of any of the above medical conditions, or recent or existing injury which your manager/coach needs to be aware of

I wish to be registered as a player of Fairford Youth Football Club and agree to the policies and procedures of the Club (copies available in the Club handbook).

Parent/guardian signatures _____ Date ____/____/____

For players registering for Under 9s football and above, the FA requires a photograph of your child to be submitted for player registration purposes. This should be a head and shoulders passport style photograph. Please speak to your coach for more information.

FYFC - Club subscriptions and fees

AGE GROUP	SEASONAL MEMBERSHIP FEE	COACHING SUBSCRIPTIONS	MATCH SUBS



PHOTO CONSENT FORM FOR PLAYERS

Fairford Youth Football Club takes its child welfare responsibilities extremely seriously. To this end, we require that parents/guardians notify us of their permission or otherwise as to whether they consent for photographs to be taken of their child.

As a club we occasionally take photographs of players, as do local newspapers and other organizations'. These photographs may be used in our own publications, or other publications including websites.

Please complete the form below, sign and date it and return it (together with the club signing on form) to your manager as soon as possible.

CLUB - Fairford Youth Football Club

Name of player _____

Age group for forthcoming season - under _____

May we use photographs, which include your child in printed publications?

Please tick YES NO

May we use photographs, which include your child on our website, Twitter and Facebook?

(Please note, we will never name your child directly in any images used. In team pics, we may use a squad list of names in a caption.)

Please tick YES NO

Parent/guardian's name (PRINT) _____

Signed _____ Date ____/____/____